

DEA# BM 3758933

306 Hospital Drive Suite 101  
South Williamson, KY 41503  
Telephone (606) 237-1000

Lic. # 31447

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South Williamson, KY 41503  
Telephone (606) 237-1000

Lic. # 31447

Name MICHAEL ARMISTEY  
Address \_\_\_\_\_ Date 5/11/11

F.C.R.

- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Refill NR ~~1 2 3 4 5~~

Prescription is void if more than one (1) prescription is written per blank.

**MANSOOR MAHMOOD, M.D.**

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Name MICHAEL ARMISTEY  
Address \_\_\_\_\_ Date 5/11/11

7 Steroid Injection  
w/ shoulder  
(An. (MAN on the))

- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Refill NR ~~1 2 3 4 5~~

Name MICHAEL ARMISTEY  
Address \_\_\_\_\_ Date 5/11/11

FLUORONAL STEROID  
INJECTION X 3  
LUMBAR SPINE  
w/ Dr. GUTTI

- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Refill NR ~~1 2 3 4 5~~

Prescription is void if more than one (1) prescription is written per blank.

Name MICHAEL ARMISTEY  
Address \_\_\_\_\_ Date 5/11/11

PATIENT CAN GO TO WORK 5/11/11  
LIGHT DUTY MAX LIFTING 25 LB,  
NO BENDING OR TWISTING CAUTION  
IN CLEANING ACTIVITIES DUE TO  
Shoulder INJURY

- 1-24
- 25-49
- 50-74
- 75-100
- 101-150
- 151 and over

Refill NR 1 2 3 4 5